

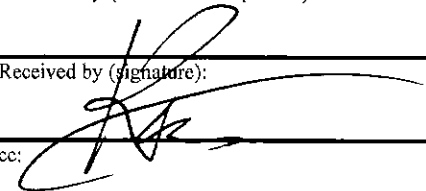


Retail Food Establishment Inspection Report

Floyd County Health Department
Telephone: 812-948-4726

X60600

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Hing Wing			Telephone Number 812 542 2725	Date of Inspection (mm/dd/yr) 12/9/2019	PERMIT # 19-137
Establishment Address (number and street, city, state, zip code) 2123 E. Spring St. New Albany, IN 47150			Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) _____	Follow-up nc	Release Date 10 days
Owner Kong Huang N				Summary of Violations: C NC R	
Owner's Address				Menu Type (See back of page) 1 2 3 4 X 5	
Person in Charge Kong Huang Ni					
Responsible Person's E-mail					
Certified Food Manager Kong Huang Ni (7/17/21)					
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"					
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"					
Section#	C/NC	R	Narrative		To Be Corrected By
			nc violations. All corrections made		
Received by (name and title printed):			Inspected by (name and title printed): A.J. Ingram (EHS)		
Received by (signature): 			Inspected by (signature): aj		
cc:		cc:		cc:	